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INDIANA TOBACCO PREVENTION AND CESSATION EXECUTIVE BOARD REQUEST FOR GRANT PROPOSALS FOR STATEWIDE PARTNERSHIPS February 17, 2006

The Indiana Tobacco Prevention and Cessation Executive Board (ITPC) announces the availability of a total of \$500,000 in funds to support grants for statewide tobacco prevention and cessation efforts. The funding period is from June 1, 2006- May 31, 2007.

Background

The Indiana Tobacco Use Prevention and Cessation Trust Fund and Tobacco Board (ITPC) were created by the Indiana General Assembly in 2000 and are governed by IC 4-12-4 (for information on Indiana Code access www.state.in.us/legislative/ic/code/). ITPC exists to prevent and reduce the use of all tobacco products in Indiana and to protect citizens from exposure to tobacco smoke. ITPC coordinates and allocates resources to:

- Change the cultural perception and social acceptability of tobacco use in Indiana
- Prevent initiation of tobacco use by Indiana youth
- Assist tobacco users in cessation
- Eliminate exposure to secondhand smoke
- Support the enforcement of tobacco laws concerning the sale of tobacco to youth and use of tobacco by youth
- Eliminate minority health disparities related to tobacco use and emphasize prevention and reduction of tobacco use by minorities, pregnant women, children, youth, and other at-risk populations.

ITPC develops and maintains a process-based and outcomes-based evaluation of funded programs and keeps State government officials, policymakers, and the general public informed regarding the progress toward tobacco prevention and cessation goals. ITPC allocations are guided by the U.S. Centers for Disease Control and Prevention's (CDC) Best Practices for Comprehensive Tobacco Control Programs to the extent possible within budget constraints. CDC recommends that States establish tobacco control programs that are comprehensive, sustainable, and accountable.

These components include:

1. Counter Marketing
2. Community Programs to Reduce Tobacco Use
3. School Programs
4. Enforcement
5. Statewide Programs
6. Cessation Programs
7. Surveillance and Evaluation
8. Administration and Management
9. Chronic Disease

In addition, guidance is provided through recommendations outlined in the Guide to Community Preventive Services for Tobacco Control Programs. This Guide provides evidence the effectiveness of community-based tobacco interventions within three areas of tobacco use prevention and control: 1) Preventing tobacco product use initiation, 2) Increasing cessation 3) Reducing exposure to secondhand smoke. The Hoosier model for tobacco control has five major categories for funding and incorporates elements from all nine categories recommended by the CDC.

The Hoosier Model consists of:

- Community Based Programs
- Statewide Media Campaign
- Enforcement
- Evaluation and Surveillance
- Administration and Management

The ITPC Executive Board has selected six priority areas for the 2010 Indiana Comprehensive Tobacco Control Plan. These six areas are:

1. Decrease Indiana youth smoking rates.
2. Increase proportion of Hoosiers not exposed to secondhand smoke.
3. Decrease Indiana adult smoking rates.
4. Increase anti-tobacco knowledge, attitudes, and beliefs necessary for smoking behavior change to occur.
5. Increase Indiana's tobacco tax to reduce adult smoking and prevent youth smoking.
6. Maintenance of state and local infrastructure necessary to lower tobacco use rates and thus make Indiana competitive on economic fronts.

Additional information about the ITPC program and evaluation results can be found in 2005 ITPC annual report <http://www.in.gov/itpc/research.asp>.

The Community-Based Programs incorporate minority, school, cessation and statewide programs designed to lower youth smoking, increase cessation among Hoosiers, and protect Hoosiers from secondhand smoke. Grants are provided in three categories:

1. Community-Based Partnerships (awarded at the county level through an RFP process in summer 2005 for SFY 2006-2007)
2. Minority-Based Partnerships (awarded at the local and state level through an RFP process in summer 2005 for SFY 2006-2007)
3. State Partnerships (to be awarded in the 2006)

Requests for Proposals: Statewide Partnerships

Rationale and Focus Areas

The ITPC collaborates with organizations interested in decreasing tobacco consumption among all ages and populations in Indiana. The ITPC specifically set aside funding for statewide partnerships in order to advance collaborative and evidence-based solutions to address Indiana's high tobacco use rates among both youth and adults.

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Awards issued for these grants must:

- Initiate or expand programs that directly address ITPC's Mission Statement;
- Propose evidence-based strategies and realistic outcomes; and include an evaluation plan;
- Consider the Healthy People 2010 risk reduction objectives with regard to tobacco use (<http://www.health.gov/healthypeople/default.htm>);
- Incorporate the CDC's Best Practices for Comprehensive Tobacco Control Programs (<http://www.cdc.gov/tobacco/bestprac.htm>);
- Use the CDC's Guide to Community Preventive Services for Tobacco Use Prevention and Control as a basis for recommendations for tobacco control interventions that have been recommended based on evidence of effectiveness found through a systematic review; <http://www.cdc.gov/tobacco/comguide.htm>
- Target specific populations identified in I.C. 4-12-4.
- Agree to fully collaborate and participate in all aspects of the ITPC funded community-based program and
- Demonstrate that the program has a strong likelihood for a sustainable effort should funding not be available in the future.

Under this grant, ITPC will NOT consider applications for:

- Projects targeting youth prevention younger than 5th grade
- Costs for nicotine replacement therapy and pharmaceuticals or other smoking cessation products
- Basic research or clinical trials
- Projects focusing on substances other than tobacco
- Grants to support operating deficits

Who May Apply

This announcement of funding is available to public and private entities and individuals as specified in I.C. 4-12-4. To avoid any potential or perceived conflict of interest between ITPC's grant recipients and tobacco-related entities, the ITPC has adopted a contractual funding condition that requires any grantee shall not accept any grant or anything else of value from any tobacco manufacturer, distributor, or other tobacco-related entity.

How to Apply

Applicants should submit a grant request to the Indiana Tobacco Prevention and Cessation Agency using the guidelines provided in this announcement.

- ❑ **The due date for applications is April 3, 2006.**
- ❑ **Applicant must submit one original and 12 copies of the application.**
- ❑ **Applications must be received in the ITPC office, 150 W. Market St., Suite 406, Indianapolis, IN by 5:00 p.m. on April 3, 2006.**

The application must include:

- *Application Cover Sheet:* (Form A)
- *Executive Summary:* Summarize the Grant Proposal in no more than 1 page.
- *Applicant Organization Capacity and History to Complete Tobacco Control Interventions:* This section should briefly introduce the organizations main accomplishments and experience in tobacco control. (No longer than 2 pages.)
- *Program Narrative:* (No longer than 25 pages, double-spaced.)
 - The program narrative should outline the following:
 - ❑ *Statement of Need and Rationale:* This section should convince the review team that the program responds to a clear, documented tobacco control need in Indiana. The program must build upon the current tobacco control needs and must facilitate change in social norms related to tobacco use in Indiana. The program should enhance current tobacco control efforts.
 - ❑ *Project Objectives:* Objectives must clearly link to the community indicators outlined in attachment A. Objectives must be clearly stated, measurable, reasonable in scope, and tied directly to the project need and rationale.
 - ❑ *Project Strategy, Activities, Timeline and Deliverables:* The overall project strategy along with activities, timeline and deliverables should be outlined.
 - ❑ *Communication Strategy:* Outline a communication plan for keeping ITPC updated on the program and a suggested plan to communicating with ITPC local partners.
- *Itemized and Detailed Budget:* The maximum grant allowed under the statewide grant proposal without required matching funds is \$60,000. All grants above \$60,000 require a 50 percent match for every dollar above \$60,000. Matching funds must be used specifically for tobacco control activities related to this project. (Use Form B.)
- *Budget Narrative:* (Use Form C.)
- *Evaluation Plan:* Successful applicants will be required to report activities quarterly to ITPC. In addition to the quarterly report system, please outline how you will evaluate the outcomes from the grant program.
- *Declarations Page:* (Use Form D.)
- *W-9:* (Use Form E.)
- *State of Indiana Direct Deposit Form:* (Use Form F.)
- *Audited Financial Statements:* This applies to any non-governmental entities. Non-governmental entities need to submit audited financial statements not over two periods old.

A limited amount of items may be included in an Appendix including letters of support and relevant staff biographies and resumes; however, there is no guarantee that these materials will be part of the review process.

Funding Levels:

Grants up to \$60,000 will be awarded without a requirement of matching funds, although matching funds are encouraged.

Grants above \$60,000 require a 50 percent match for each dollar above \$60,000. Matching funds must be used specifically for tobacco control activities related to this project.

Priorities for Funding

Applications must address a minimum of one of the following areas:

1. Evidence-based tobacco control efforts that address protecting Hoosiers from exposure to secondhand smoke. The scope of work should address statewide organizational support that will enhance local community-wide work to implement smoke free air policies.
2. VOICE- Evidence-based efforts that mobilize and galvanize youth's capacity to counter the use of tobacco by Indiana's youth and educate youth about the cause and prevention of diseases association with the use of tobacco products. These efforts should be youth driven, involve mentors who are willing to develop leadership skills in youth, and develop the infrastructure to become self-sustaining.
3. Evidence-based tobacco prevention efforts for school-linked activities to implement the CDC's Guidelines for Comprehensive School Based Tobacco Use Prevention. The scope of work for these efforts must include all of the following areas tobacco-free policies, including tobacco free school grounds; effective tobacco use prevention curricula; teacher training; family involvement; in-school cessation support services; and linkage with community-based partnerships and programs.
4. Evidence based efforts to mobilize strong partner coalitions that reflect a target population of the ITPC, specifically those that reach minority populations and/or disparately affected populations throughout the state including such pregnant women, young adults, and other at-risk populations. Such activities include developing partnerships, providing training, conducting public awareness, and encouraging policies that support tobacco use prevention and cessation and information specific to these populations.
5. Evidence-based tobacco cessation efforts for Indiana that address promoting cessation resources. The scope of work for these efforts should focus one of the following areas: promoting cessation policy development and implementation among health care providers; promoting cessation policy development and implementation among Indiana employers; encouraging adequate cessation coverage by Indiana employers; increasing the linkages to cessation programs for youth and adults attempting to access cessation information, services, and policy development; or supporting clinical practice guidelines issued by the U.S. Department of Health and Human Services.

The grant award size will vary by circumstances, need, and program model. Submission of grant application, even one that meets all grant requirements, does not guarantee receipt of an award.

Review Process

All applications submitted will under undergo a multi-stage review process that may include:

- Technical analysis by Agency staff;
- Review by the ITPC's Review Team;
- Possible presentations to the ITPC Review Team or Executive Board.

Review Criteria

Applications will be assessed on the basis of the following criteria:

Statement of need and program rational

The proposal should:

- ❑ Include a detailed needs assessment including source documentation, a detailed review of current tobacco cessation or prevention activities relevant to the proposed effort, and a description of the targeted population;
- ❑ Summarize how the proposed program will advance other funded programs of the ITPC; and
- ❑ Review resources, including financial and matching support, available for the proposed effort.

Soundness of proposed plan, strategy, activities, timeline.

The proposal should:

- ❑ Include a detailed summary of the project's principal objectives and expected outcomes for the grant funding period that address one or more areas of the ITPC's Mission Statement, one or more of the six priority areas for 2010, and one of the funding priority areas outlined in this Request for Proposals;
- ❑ Demonstrate evidenced based tobacco prevention or cessation efforts;
- ❑ Attest to the applicant's ability and willingness to participate and support ITPC's sponsored evaluation and research projects;
- ❑ Demonstrate an ability to galvanize a strong partner coalition reflective of the targeted area's ethnic and social diversity, if applicable;
- ❑ Outline project deliverables to result from the effort;
- ❑ Demonstrate a strong likelihood for a sustainable effort after the contract period; and
- ❑ Provide a detailed timeline for the program with projected deliverables through the grant period of June 1, 2006– May 31, 2007

Organizational capacity and accomplishments to date

The proposal should:

- ❑ Provide evidence of organizational experience in tobacco control programs;
- ❑ Demonstrate the applicant's ability to provide sound programmatic and fiscal oversight;
- ❑ Include a detailed overview of tobacco control related accomplishments to date as well as an evaluation of those accomplishments;
- ❑ Demonstrate a strong likelihood to sustain effort after the grant period; and
- ❑ Document the applicant's agreement to participate in evaluation.

Proposed budget and cost

The proposal should:

- ❑ Include a cost-effectiveness budget appropriate to the scope and nature of the program;
- ❑ Demonstrate how the requested funds related to the applicant's organization budget for the current year and
- ❑ Outlines matching funds requirement for grants exceeding \$60,000.

Use of Funds

The ITPC expects that funds allocated through this request for proposals will only support program development, implementation, and coordination for the proposed project. A fixed indirect cost rate no more than 5% on direct cost expenditures. Indirect costs include operating and maintaining buildings, ground, and equipment; and general administrative expenses.

Declaration

It is ITPC policy that any organization or individual receiving funding from ITPC must agree as a condition of receiving funds that they will not accept any funding from the tobacco industry.

The ITPC may seek additional information from an applicant prior to or during the review of the application.

The ITPC reserves the right to negotiate a modification of the proposed work plan and or budget and will award funds after agreement has been reached.

The ITPC reserves the right to examine the physical location, all books, documents, papers, accounting records, and other evidence (Records) pertaining to administration of the program upon request and copies thereof shall be furnished at no cost to ITPC. Grantees will be subject to an Indiana State Board of Accounts monitoring engagement per ITPC's request.

Technical Assistance

Applicants should submit questions in writing or by email regarding proposals to the ITPC by 4:00 p.m. on March 6, 2006. All questions and answers will be posted on the ITPC website at www.itpc.in.gov. Questions should be submitted to:

Anita Wood Gaillard
150 W. Market Street, Suite 406
Indianapolis, IN 46204
(317) 234-1786 (FAX)
email: agaillard@itpc.in.gov

Indiana Tobacco Prevention and Cessation Program

Application Cover Sheet

Application for Statewide Partnerships

Agency Information

Lead Agency Name:

Lead Agency Contact, Director or CEO:

Address:

City:

State:

Zip Code:

Telephone:

Fax:

Email:

Federal Identification Number: _____

Primary Contact Information

Primary Contact to ITPC:

Primary Contact Address if different from above:

City:

State:

Zip Code:

Telephone:

Fax:

Email:

Signature of Primary Contact:

Proposal Information

Funding requested:

\$ _____

Matching funds to be provided:

\$ _____

Total Funding available for project:

\$ _____

Statewide and Regional Programs
Budget Worksheet – **Form B**

	Matching Expenses	ITPC Expe
1. Personnel		
a. Salaries/Wages %FE Annual Salary Wage #Months		
1. (Position Title)		
2. (Position Title)		
TOTAL SALARIES/WAGES >		
b. Fringe Benefits		
1. (Position Title)		
2. (Position Title)		
TOTAL FRINGE BENEFITS >		
2. Travel		
a. In-State		
b. Out-of-State		
TOTAL TRAVEL >		
3. Supplies		
a.		
b.		
TOTAL SUPPLIES >		
4. Contracts		
a.		
b.		
TOTAL SUBCONTRACTS >		
5. Other		
a.		
b.		
TOTAL OTHER>		
6. Paid Media		
a.		
TOTAL PAID MEDIA (cannot exceed 5% of total ITPC grant award)		
7. Furniture & Equipment		
a.		
b.		
TOTAL FURNITURE & EQUIPMENT >		
TOTAL DIRECT COSTS>		
8. INDIRECT COSTS (Include if you have an indirect cost component. Maximum of 5% of the total direct cost requested is allowed.)		
TOTAL AMOUNT MATCHING AND REQUESTED FROM ITPC		

Note: 1. Line items must be explained in a narrative Budget Justification
2. Costs such as central services, rent, and accounting can be budgeted in either #5 or #8, but not both.

Statewide and Regional Programs Budget Narrative
Form C

Personnel: (List positions here, Summary of job description or responsibilities should be detailed on additional attached sheets with one job description per attached sheet)

Travel: (List anticipated travel here. The detailed information of each event/conference should include; rationale for attending and anticipated follow-up from your attendance. Please attach detail on separate sheets, one event/conference per page. Please follow additional guidelines in instructions.)

Supplies: (explain the type and use of the educational and promotional supplies in your Program. List the different types of supplies on separate line items for example, office supplies, educational supplies, and promotional items, if any. If different types of supplies are not specifically listed ITPC will consider any unspecified line item of supplies as program oriented education supplies only.)

Contracts: (On separate documents for each contract, include scope of work; including tasks and deliverables, time period of the contract, person in your organization who will supervise or manage the contract, name of contractor if known, otherwise explain method of selecting the contractor.)

Paid Media: (Advertising and communication media must utilize the media campaign imaging and the common messages developed by the Indiana Tobacco Use Prevention and Cessation Executive Board. Advertising and communication expenses for paid media cannot exceed 5% of the total grant amount awarded.)

Other: (Provide a detailed breakdown and explanation for expenditures. Costs included elsewhere in the budget cannot also be included in the other line item in the budget.)

Furniture and Equipment: (Explain in detail. Office furniture, equipment and computer/software and/or upgrades, provided they are reasonable expenditures relative to the work proposed. All furniture and equipment purchased over \$500.00 will remain property of the State of Indiana after the term of this grant contract.)

See information following for additional guidance.

Statewide and Regional Programs Budget Narrative

Be specific regarding what tobacco grant expenditures will be paid with matching funds; the narrative should mirror the budget worksheet and provide verbal explanation of the dollar amounts included in the budget.

BUDGET EXPLANATION

Description of Budget Line Items

The following line items should be included if applicable. Use the budget form provided or a similar format. Explanation of budget items must be submitted on a separate page or incorporated into a budget form.

1. Personnel

a. Salaries and Wages

For each staff position proposed, include the title of the position, percentage of time (FTE), annual salary, and number of month's salary requested, and a summary of the job description or responsibilities. Staff position(s) paid by Statewide and Regional program funds must be dedicated only to tobacco use prevention activities approved in the work plan.

Tobacco programming activities must occur during the calendar quarter for which the staff is being paid salaries and wages. Paid staff must document hours worked and summarize activities performed on a daily log. Salaries and wages paid to staff must be for hours worked in the same calendar quarter and evidenced by the daily log.

Salary and wage increases for staff can only be applied after an individual has worked toward approved plan goals for more than 12 months. A cap on annual salary increases is limited to the consumer price index – all urban consumers, as published by the U.S. Department of Labor, Bureau of Labor Statistics Data (www.bls.gov) or 3% of the current approved salary and wages, whichever percentage is less. Please apply the percentage, not to exceed the 3% limit, as applicable, by checking the year and month that corresponds with the one-year anniversary of the staff person in question. Please remember that the earliest date staff could have been actively employed is the date of the final signature on the grant contract. The final signature date is the date the contract is considered fully executed

b. Fringe Benefits

For each position, indicate the rate and compute the amount charged for fringe benefits usually and customarily provided by the organization for employees. ITPC grant funding cannot be used to provide benefits in excess of those normally and customarily offered to all employees. If the organization does not provide fringe benefits to all employees, ITPC grant dollars cannot be used to provide benefits not normally and customarily offered. Please refer to the human resources department of your lead agency for guidance on this budget line item.

2. Travel

Expenditures for travel will be limited to the rate customarily paid by the agency or the current rate being paid by the State of Indiana, whichever is the lesser. A chart summarizing the maximum reimbursement amounts from the State of Indiana's, Financial Management Circular No. 97-1.1 effective March 1, 1997, revised January 2004, is included for reference.

Expenses incurred to attend tobacco use prevention and cessation trainings, conferences and meetings are permitted. Present the following for each event: Description of the event or conference; rationale for attending (this should connect directly to the partnership's vision and program activities); anticipated follow-up from the event after you return to the community; budget estimate (travel, lodging, meals, registration fees, other expenses.)

3. Supplies

Supplies may include: office supplies, meeting supplies, or other supplies, including those supplies not specifically excluded. The purchase of tobacco use prevention educational supplies should be consistent with the goals and objectives of the Tobacco Use Prevention and Cessation Executive Board. Include a narrative justification outlining the intended use and incorporation of the supplies into the local program. Food is a prohibited expense with ITPC funding.

4. Contractual

On separate forms provide descriptions of contracts for program activities, these must be included along with budget information. (Contracts for administrative activities such as out of agency printing, etc., do not need to be described.) On the budget form or on another page describe for each contract the following information: 1) scope of work including tasks and deliverables, 2) time period of the contract, 3) person in the agency who will supervise or manage the sub-recipient contract, 4) name of the contractor or, if not yet known, what method will be used to select the contractor, e.g. bids, RFPs, mini-grants, sole source, etc.

The subcontract agreement format provided by the Tobacco Prevention and Cessation Agency should serve as a boilerplate to collect information on subcontractors. If additional space is needed to explain the details of a contract please attach and reference these documents within the body of the subcontract or mini-grant agreements. The boilerplate contract documents provided are not intended to be the sole source of information for executing a contract for goods or services.

5. Other

This category can include costs for items such as telephone, rent, copying, printing, postage, mailing, publications, and public and professional education costs. If the agency or organization has an approved indirect cost plan, costs may not be included in the **Other** category if they are included in the indirect charge.

Rent to be paid for space for tobacco prevention and cessation programming activities cannot exceed the fair market value for the space. Document how the rental expense was determined and retain this documentation in the records.

Cell phone expense paid from tobacco grant funds must be for calls to conduct tobacco prevention and cessation business. To be reimbursed for cell phone calls, the grantee must have an approved line item in the budget for cell phone expense and provide itemized billing receipts with tobacco prevention and cessation phone calls highlighted. The reimbursement can only be for the calls to conduct tobacco prevention and cessation business. No reimbursement will be issued for cell phone expenses without itemized billing for calls that cannot be documented as for tobacco prevention and cessation activities. To direct pay a vendor for cell phone expenses you must have itemized billings, highlight the calls for tobacco grant programming activities and only pay for the calls that are for tobacco grant programming activities. If you contract for a flat fee for cell phone expenditures, you must still get itemized billing, highlight the calls that are for tobacco programming activities and calculate the percentage of the total expense that was incurred to conduct tobacco grant

programming activities. Only charge the tobacco grant for the percentage of tobacco grant program calls applicable.

6. Paid Media

Advertising and communication media must utilize the media campaign imaging and the common messages developed by the Indiana Tobacco Use Prevention and Cessation Executive Board. Advertising and communication expenses for paid media cannot exceed 5% of the total grant amount awarded.

7. Furniture and Equipment

Office furniture, equipment and computer/software upgrades, are allowable, provided they are reasonable expenditures relative to the work proposed and were not purchased in a previous year. All equipment purchased with grant funds, which cost \$500 or more, shall remain the property of the Indiana Tobacco Prevention and Cessation Agency and shall not be sold or disposed of without written consent from the Indiana Tobacco Prevention and Cessation Agency. All furniture, equipment and computer/software upgrades purchased which cost \$500 or more must be listed on a fixed assets listing, see sample document in appendix.

8. Indirect Charges

Indirect charges will vary according to need and are payable to the lead agency/fiscal agent only. Indirect costs are not an allowable expense for mini-grant recipients or subcontractors. All costs incurred by mini-grantees or subcontractors must be direct costs to provide goods or services. Organizations may budget up to a maximum of 5% of the total direct cost amount for indirect costs. This amount is an integral component of the total grant award. The total charges that are included in the approved indirect cost rate may not be listed as direct costs in the budget. Typical examples of indirect costs may include central service costs, accounting personnel services, the costs of operating and maintaining facilities, etc. Check with the fiscal officer to see if you are allowed to include an Indirect Charge, and to see what costs are categorized as "indirect" for the organization.

9. Additional Conditions

The Grantee agrees to abide by the following additional conditions:

- a. That grant funds and program income shall not be expended for:
 1. Construction of buildings, building renovations;
 2. Depreciation of existing buildings or equipment;
 3. Contributions, gifts, donations, dues to societies, organizations, or federations;
 4. Entertainment;
 5. Automobile purchases, rental and/or leases;
 6. Interest and other financial costs;
 7. Fines and penalties;
 8. Bad debts;
 9. Contingency funds;
 10. Food; and
 11. Political contributions.
- b. All disbursements are required by law to be fully itemized. IC 4-10-11-1 states that payments shall not be approved by any officer or officers authorized to approve the same, unless so itemized, and when invoices are presented for payment, they shall be accompanied by said itemized accounts and statements. Other state statutes requiring fully itemized state payments include the following:

IC 5-11-10-1 Disbursements on itemized claims only.

IC 4-10-12-1 Claim vouchers must show expenditure is for purpose appropriated.

Information necessary to sufficiently itemize payments ranges from listing specific contract program detail to providing unit costs, quantity, and description for each item or service received. Adequate information must be provided to substantiate hourly billing, such as activities performed and cost per hour. If reference is made to a vendor invoice, statement, or bill, it should be attached. Blank or incomplete invoices should never be certified or paid by Grantees.

Public funds may not be used to pay for personal items or for expenses that do not relate to the functions and purposes of the tobacco grant program. Personal long distance calls are not to be charged to the grant. Cellular phone service, which is paid for with grant funds, is for the sole benefit of the program for which grant funds have been received. Grantees have a responsibility to monitor cellular phone expenses to ensure they are not paying for airtime that is not needed.

Dues and subscriptions paid from public funds should be for institutional memberships; i.e. in the name of the organization, or grantee's organization name, not an individual's name.

No checks can be issued for cash to pay expenditures. Checks must be made out to the subcontractor, mini-grantee and/or supplier.

No petty cash funds can be established.

Grantees must reimburse staff for travel expenditures, no advance payments without specific written permission from ITPC.

Grantees are responsible for collecting any overpayment or duplicate payments made. Repayment should be sought immediately once an overpayment has been identified.

Grantees are obligated to collect, document and retain all such information necessary to certify invoices submitted for payment for goods or services received. Grantees have the duty to pay properly documented invoices in a timely fashion.

- c. The Grantee will maintain a fixed assets listing as prescribed in the budget explanation. See attached sample of listing.
- d. Grantees will account for tobacco grant funds separately from other organization funds and will reconcile the tobacco grant fund account monthly. At the end of the quarter the fund and account statement must reconcile to the quarterly fiscal report submitted to ITPC.
- e. That acceptance of any services offered under this Grant Agreement shall be voluntary on the part of the individual to whom such services are offered and that acceptance of any services shall not be a prerequisite to eligibility for the receipt of any other services under the Grant Agreement.

- f. That any proposed changes in the target population served under this Grant Agreement or any proposed changes in geographic location of service sites must be submitted in writing to the Tobacco Prevention and Cessation Agency.
- g. That funding is contingent upon providing individualized data files in a file structure specified by the Indiana Tobacco Prevention and Cessation Agency. Grantee will submit said data files to the Indiana Tobacco Prevention and Cessation Agency no later than the 30th day after the end of the month in which the Grantee's quarterly report is due according to a specific schedule determined by the Indiana Tobacco Prevention and Cessation Agency. The data provided by the Grantee will be used to perform statistical and evaluative functions, and other reporting requirements.
- h. That changes in line items in the budget will be requested in writing and approved by a duly authorized representative of the Indiana Tobacco Prevention and Cessation Agency prior to implementation.
- i. That payment is contingent upon timely receipt of required client data in accordance with procedures and schedules established by the Indiana Tobacco Prevention and Cessation Agency, a copy of which is available upon request.
- j. That all income generated by grant funds shall be added to the grant fund balance in the period in which it is earned and is subject to the same requirements as the basic grant monies. All grant monies must be invested in types of investments as directed by current statute, IC 5-13-9-1 thru 5. Please refer to the current statute for guidance.
- k. To adopt and enforce a no smoking policy in project facilities at all times.
- l. Within 30 days after the end of the fiscal year, the designated Lead Agency must file Form E-1 with the Indiana State Board of Accounts so the audit requirements can be determined and communicated to the agency. For additional information please contact Mike Bozyski, Supervisor for Not-for-Profit Corporations at 232-2525 or www.ai.org/sboa/monthlye.html to review the information on-line.

Summary of Travel Allowances

1. Overnight Travel: The subsistence allowance for in-state travel is \$26.00 per day.
Example:

	<u>SUBSISTENCE IN-STATE</u>	<u>SUBSISTENCE OUT-OF-STATE</u>
Before 12:00 pm Departure	\$26.00	\$32.00
Between 12:00 pm and 4:30 pm Departure	\$13.00	\$16.00
After 4:30 pm Departure	\$0.00	\$0.00
Before 12:00 pm Return	\$13.00	\$16.00
After 12:00 pm Return	\$26.00	\$32.00

2. Meals provided are to be listed and deducted as follows:

	<u>IN-STATE</u>	<u>OUT-OF-STATE</u>
Breakfast	\$6.50	\$8.00
Lunch	\$6.50	\$8.00
Dinner	\$13.00	\$16.00

3. ONE DAY TRIPS:

	<u>IN-STATE</u>	<u>OUT-OF-STATE</u>
Gone less than 12 hours	\$0.00	\$0.00
Gone more than 12 hours	\$13.00	\$16.00
Leave before 6a.m. and return after 6p	\$19.50	\$24.00

WHEN A MEAL IS PROVIDED, NO SUBSISTENCE WILL BE REIMBURSED FOR THAT MEAL.

4. MILEAGE

	<u>IN-STATE</u>	<u>OUT-OF-STATE</u>
First 500 miles	\$0.40	\$0.40
501 – 2500 miles	\$0.17	\$0.17

5. LODGING

IN-STATE
\$79.00/\$83.00

Effective July 1, 1999, revised October 1, 2005 and, the maximum rate for In-State, outside of the Indianapolis Metropolitan area, lodging will be \$79.00 per night per person plus applicable taxes and inside of the Indianapolis Metropolitan area, lodging will be \$83.00 per night per person plus applicable taxes.

Indiana Tobacco Prevention and Cessation Agency (ITPC) Declarations - Form D

The ITPC policy is that any organization or individual receiving funding from ITPC must agree as a condition of receiving funds that they will not accept any funding from the tobacco industry.

The ITPC may seek additional information from an applicant prior to or during the review of the application.

The ITPC reserves the right to negotiate a modification of the proposed work plan and will award funds after agreement has been reached.

The ITPC reserves the right to examine the physical location, all books, documents, papers, accounting records, and other evidence (Records) pertaining to the administration of the community program upon request and copies thereof shall be furnished at no cost to the Indiana Tobacco Prevention and Cessation Agency.

Signing below indicates that you have read and understand these declarations. For questions and assistance please call: Indiana Tobacco Prevention and Cessation Agency at (317) 234-1787

Signature

Date

Printed Name

Specific Instructions

Name. If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first and then circle the name of the person or entity whose number you enter in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Part I—Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box.

If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see **How to get a TIN** below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are an LLC that is disregarded as an entity separate from its owner (see **Limited liability company (LLC)** above), and are owned by an individual, enter your SSN (or "pre-LLC" EIN, if desired). If the owner of a disregarded LLC is a corporation, partnership, etc., enter the owner's EIN.

Note: See the chart on this page for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office. Get Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can get Forms W-7 and SS-4 from the IRS by calling 1-800-TAX-FORM (1-800-829-3676) or from the IRS's Internet Web Site at www.irs.gov.

If you do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all

such payments until you provide your TIN to the requester.

Note: Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Part II—For U.S. Payees Exempt From Backup Withholding

Individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. For more information on exempt payees, see the separate Instructions for the Requester of Form W-9.

If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding. Enter your correct TIN in Part I, write "Exempt" in Part II, and sign and date the form.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

Part III—Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 3, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required).

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified state tuition program payments, IRA or MSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to give your correct TIN to persons who must file information returns with the IRS to

report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA or MSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 31% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

What Name and Number To Give the Requester

For this type of account: Give name and SSN of:

1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship	The owner ³

For this type of account: Give name and EIN of:

6. Sole proprietorship	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name, but you may also enter your business or "DBA" name. You may use either your SSN or EIN (if you have one).

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.



Title

ATTACHMENT A:

ITPC Community Indicators Appropriate for Statewide Grant Proposals

- ☐ Proportion of Indiana school districts that support and implement a comprehensive school strategy against tobacco use.
- ☐ Extent of community activism among youth to support community change that includes youth involved in the Voice movement.
- ☐ Proportion of smoke free policies for worksites, including restaurants and bars.
- ☐ Extent of tobacco control policies on university/college campuses. This includes indoor and outdoor spaces such as student housing, classroom buildings and athletic facilities.
- ☐ Proportion of health care providers and health care systems that have fully implemented the Public Health Service Guidelines for Cessation.
- ☐ Proportion of worksites that provide employer-sponsored cessation support for employees who use tobacco.
- ☐ Extent of participation by groups representing disparately affected populations in the community.